

**SECRET**  
(When Filled In)

## VOUCHER NO. — DATE 2-12

DIVISION VOUCHER NO.

6 June 67 7062

**SUBJECT**

INVOICE NO(S). SES-W 115(9)

PAYMENT TO SYLVANIA ELECTRIC PRODUCTS INC

CONTRACT NO. HW-500

OUNT #1,261.91

**CHECK TO BE DATED**

**CASH PAYMENT**

U.S. TREASURY CHECK

AGENT CASHIER CHECK

BANK CASHIER'S CHECK

THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ \_\_\_\_\_ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW

I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$						OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.	
DATE	SIGNATURE OF PAYEE	DATE	SIGNATURE OF AGENT	DATE	SIGNATURE OF RECIPIENT		

[illegible]

DESCRIPTION		T/A NO.	CODE	REF. NO.	PAY PER.	C.O.D.	GENERAL LEDGER ACCT. NO.	ACCOUNT SYMBOL	CLASS	AMOUNT	
ADVANCE ACCOUNTS 13-27		SHIP. DOC. NO.	REC. RPT. NO.	X ADVANCE ACCT. NO.	LIO CODE	Y P T		F U N Y	61-66 CK. NO.	68-70 DUE DATE	DEBIT CREDIT
		32-93 DIV		E EMP. NO.							

Sylvan, IA	88020506	1601.047	61-1002	2540	1,26191	J
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SYLVANIA	138.0	1241	1,261
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11/11/17 5

[illegible][illegible][illegible]

DATE <u>5/1</u>		DATE		REVIEWED BY	CERTIFIED FOR PAYMENT OR CREDIT	
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FORM 1822 ORSOL 5-55	DATE	SIGNATURE OF CE
		(Signed)

SECRET

GROUP 1  
EXCLUDED FROM AUTOMATIC  
DOWNGRADING AND DECLASSIFICATION

Sanitized Copy Approved for Release 2011/01/05 : CIA-RDP89B00709R000300720009-8

**SECRET**

**GROUP 1**  
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Standard Form No. 1034

7 GAO 5000  
1034-110-06PURCHASER'S VOUCHER FOR PURCHASES AND  
SERVICES OTHER THAN PERSONAL

U.S. DEPARTMENT, BUREAU, OR ESTABLISHMENT AND LOCATION

DEPARTMENT OF THE NAVY

FEB 15

DATE VOUCHER PREPARED

25 January 1967

VOUCHER NUMBER

SES-W 115 (9)

CONTRACT NUMBER AND DATE

HW-500

PAID BY

REQUISITION NUMBER AND DATE

PAYEE'S NAME Sylvania Electric Products Inc.

P. O. Box 1466

AND Church Street Station

ADDRESS New York, New York 10008

DATE INVOICE RECEIVED

DISCOUNT TERMS

PAYEE'S ACCOUNT NUMBER

SHIPPED FROM

TO

WEIGHT

GOVERNMENT B/L NUMBER

NUMBER  
AND DATE  
OF ORDERDATE OF  
DELIVERY  
OR SERVICEARTICLES OR SERVICES  
(Enter description, item number of contract or Federal  
supply schedule, and other information deemed necessary)QUAN-  
TITY

UNIT PRICE

COST

PER

AMOUNT

(1)

For Detail see Attachment

Total Amount Claimed transferred  
from page 2, SF 1035.

\$ 1,261.91

COST REIMBURSABLE

COMPLETION VOUCHER (Date)

CONTRACTING OFFICER

AUTHORIZED CERTIFYING OFFICER

(Use continuation sheet(s) if necessary)

(Payee must NOT use the space below)

TOTAL

\$ 1,261.91

PAYMENT:

☐ COMPLETE☐ PARTIAL☐ FINAL☐ PROGRESS☐ ADVANCE

APPROVED FOR

= \$

EXCHANGE RATE

= \$1.00

DIFFERENCES

BY

TITLE

Amount verified; correct for

(Signature or initials)

Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.

(Date)

(Authorized Certifying Officer)

(Title)

## ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Appropriation Symbol  
and SubheadObject  
ClassExpenditure  
AccountChargeable  
ActivityBureau Cont. or  
Subanth'n ActivityBureau  
Control No.Sub-  
auth'n No.Identifi-  
cation No.

Amount

I.R. No's

PAID BY

CHECK NUMBER

ON TREASURER OF THE UNITED STATES

CHECK NUMBER

ON (Name of bank)

CASH

DATE

PAYEE

\$

1 When stated in foreign currency, insert name of currency.

2 If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign in the space provided, over his official title.

When a voucher is receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.

PER

TITLE

